

PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/668,883
	Filing Date	September 23, 2003
	First Named Inventor	John Paul Maye
	Art Unit	
	Examiner Name	
Total Number of Pages in This Submission	Attorney Docket Number	50557-11

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Application Data Sheet;
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	Return Receipt Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Bruce A. Kaser
Signature	
Date	February 23, 2004

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	Bruce A. Kaser
Signature	
Date	2/23/04

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



APPLICATION DATA SHEET

Application Information

Application number:: 10/668,883

Filing Date:: September 23, 2003

Application Type:: Utility

Subject Matter::

✓ Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: No

Number of CD disks:: 0

Number of copies of CDs:: 0

Sequence submission?:: No

Computer Readable Form (CRF)?:: No

Number of copies of CRF:: 0

Title :: ~~HOP ACIDS AS AN ANTIMICROBIAL AGENT
FOR USE IN FOOD PROCESSING FACILITY~~

Title :: HOP ACIDS AS A REPLACEMENT FOR
ANTIBIOTICS IN ANIMAL FEED

Attorney Docket Number:: 50557-11

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: None

Total Drawing Sheets:: 0

Small Entity?:: Yes

Petition included?:: No

Petition Type::

Licensed U.S. Gov't Agency:: No

Contract or Grant No:: No

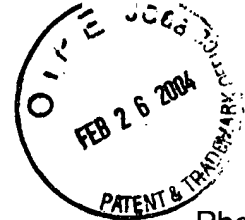
Secrecy Order in Parent Appl.?:: No

First Applicant Information

Applicant Authority Type:: Full authority
Primary Citizenship Country:: US
Status:: Inventor
Given Name:: John
Middle Name:: Paul
Family Name:: Maye
Name Suffix::
City of Residence:: Washington
State or Province of Residence:: DC
Country of Residence:: US
Street of mailing address:: 5185 MacArthur Blvd., N.W., Suite 300
City of mailing address:: Washington
State or Province of mailing address:: DC
Country of mailing address:: US
Postal or Zip Code of mailing address:: 20016-3341

Correspondence Information

Correspondence Customer Number:: **22504**
Name:: Bruce A. Kaser
Street of mailing address:: 2600 Century Square, 1501 Fourth Avenue
City of mailing address:: Seattle
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98101-1688



Phone number:: 206-628-7653
Fax Number: 206-628-7699
E-Mail address:: brucekaser@dwt.com

Representative Information

Representative Customer Number::		22504
----------------------------------	--	-------

Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
	Provisional	60/413,246	September 23, 2002

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	